CERTIFICATE OF PARTY ENDORSEMENT
At the [check one] In town committee meeting acaucus town convention of the REPUBLICAN PARTY
of the REPUBLICAN PARTY
for the [insert Assembly District Number] 33 Assembly District,
held at City Hall 245 de Koven Drive, 14 idollo fown on the 23 day of May, 2016, (location of meeting)
I was endorsed by such endorsing authority as candidate for nomination to the office of
State Representative for said district, for the State Election to be held
on November 8, 2016; and I authorize my name to appear on the ballot as printed or typed below:
(Print or type name in (Full Residence AddressStreet) (Town) (Zip)  exactly the form in which you authorize it to appear on ballot)
Dated at Middle faurn , Connecticut, this 23 day of May , 2016.
ATTESTED BY:  OR Holen & Landry  Signature of Chairman or Presiding  Officer of Meeting  OR Signature of Secretary of Meeting
2-B

IMPORTANT: If this certificate, properly completed, is not received by the SECRETARY OF THE STATE by the deadline indicated above, the party shall be deemed to have made NO ENDORSEMENT OF ANY CANDIDATE for the office. (§9-391)

To be filed with the SECRETARY OF THE STATE not later than 4 p.m. on the fourteenth day after the close of the town committee meeting, caucus, or convention (or if such fourteenth day is a Saturday, Sunday or legal holiday, not later than 4 p.m. on the next succeeding business day), in accordance with §§9-391 and 9-2 of the General Statutes. NOTE: this form is to be used only by the party-endorsed candidate for the municipal (single-town) office of State Representative (i.e., Assembly Districts which do not cross town lines).

CERTIFICATE OF PARTY ENDORSEMENT
At the [check one] Town committee meeting  acucus  town convention
of the DEMOCRATIC PARTY
of the DEMOCRATIC PARTY  for the [insert Assembly District Number] 3300 Assembly District,  (District number)
held at Middle town City HAU on the 19th day of May, 2016,
(location of meeting) (date) (date)
I was endorsed by such endorsing authority as candidate for nomination to the office of
State Representative for said district, for the State Election to be held
on November 8, 2016; and I authorize my name to appear on the ballot as printed or typed below:
Seph C. Sera 1510 Randelp Rd Middlefown CT (Print or type name in (Full Residence Address-Street) (Town) (Zip)  exactly the form in which you authorize it to appear on ballot)
Dated at Middle town, Connecticut, this 19 day of May, 2016.
ATTESTED BY:  OR  Signature of Chairman or Presiding  Officer of Meeting  Signature of Secretary of Meeting

<u>IMPORTANT</u>: If this certificate, properly completed, is not received by the SECRETARY OF THE STATE by the deadline indicated above, the party shall be deemed to have made <u>NO ENDORSEMENT OF ANY</u>